



Dec
1997

UPCOMING EDUCATION OFFERINGS

TNCC----FEB 4TH AND 5TH, MARCH 25TH
AND 26TH IN SIOUX FALLS
SPONSORED BY MCK TRUAMA

APRIL 29TH AND 30TH IN
WATERTOWN SPONSORED BY MCK
TRAUMA AND PRAIRE LAKES ED

CATN---MARCH 4TH AND 5TH IN SIOUX
FALLS SPONSORED BY ENA TRAUMA
COMMITTEE

ENPC---JAN 19-20, IN RAPID CITY
MAR 23-24, IN SIOUX FALLS AT
SVH
OCT 19-20, IN SIOUX FALLS AT
SVH

Message from the President
Jill Wiesner, RN BSN CEN

As 1997 comes to a close, so does my term as President of SD ENA. I have been privileged to be a spokesperson for such a great organization. It is through members time and energy that ENA educational courses and safety information is offered in our state. As we progress and grow, there will be many opportunities to bring ENA sponsored events to our area hospitals and communities. I challenge all to become actively involved in a local SD ENA sponsored event.

The first statewide Emergency Nurses Day Celebration was October 8. It was a great event with National ENA Board Member Sherri Almeida from Texas as featured speaker. Her message on "Emergency Nursing Into the Millennium" offered ideas to expand our activities beyond the walls of our workplace. Nurses from Spearfish, Rapid City, Pierre, Aberdeen, Webster, Yankton, Watertown, and Sioux Falls joined in an afternoon of fun, food and fellowship. Sherri did not accept an honorarium, but asked that it be used for two new SD ENA memberships. What a great gift for two nurses and SD ENA. An application for this gift was sent to all hospitals so any interested emergency nurse had opportunity.

I do want to thank you for the opportunity to serve as president these past 2 years. Also, a big thank you to Darlene Even who has served SD ENA as Secretary-Treasurer for 6 years. What a tremendous contribution.

Congratulations and best wishes to the new 1998 offices, President Bette Gustafson and Secretary Paula Vogelsang.

New Memberships Awarded

As stated in the President's message we were able to provide two one year memberships to those interested and who returned the application of interest. Thirteen people returned applications.

1997 General Assembly Report
Bette Gustafson, RN MS C

At the 1997 ENA General Assembly in Atlanta, several resolutions were discussed, revised, and put to a vote. The first resolution, entitled "Telecommunication and Informatics Technology," will guide the ENA through the use of telecommunications to access and interact with the ENA National organization. A strategic plan is to be presented at the 1998 General Assembly addressing the use of telecommunications.

The second resolution, "Customer Service in the Emergency Department," directed the ENA to develop a position statement that addresses customer service. Educational programs for customers health care providers, managers and administrators will be developed.

The delegates readily passed a Mission Statement and Values Statement, which was the third resolution before the Assembly. These statements had not been formalized and voted on; the Board felt they would help with ENA's future plans and growth.

The final resolution, which absorbed the greatest amount of discussion and debate, was the ENA's declaration of position on assisted suicide. The outcome produced a statement that declared the ENA's opposition to assisted suicide. The discussion over this topic made it apparent that the membership wanted to have end of life issues addressed. A task force was created for this purpose.

The General Assembly was an experience that, as a voting member from the South Dakota delegation, was educational and enlightening. Any delegate could speak to the issues. Thank you to South Dakota ENA for supporting my experience at the 1997 General Assembly.

Who Shall Save the Children?

Paulette Kirby, RN, MS

Three little girls-two big girls
struggle to live in a hazardous world

Taking on a task that yet so small
maybe more difficult for the under-tall

Hello, hello Ms, Oh would you please
help us across this dangerous street

Cars zoom by; don't give us time
to run across when we read the sign

We're so glad that you came by
to give us a hand; my sisters and I

Thank you, thank you; we owe you a lot
for helping us cross this terrible spot

Someone should really look out for us
for into you grown-ups we put our trust

To strive to make this place a safer world
for all other kids and us three girls.

L.D Shields

Pediatric Committee
Paulette Kirby, RN MS

It has been an exciting year for the Pediatric Committee. We have had seven successful ENPC-P, one ENPC-I course and two activities within the community: a safety fair and safety event.

In addition to Sioux Falls, Huron, and Rapid City have become active with ENPC. Huron has two instructors and Rapid City has seven instructors candidates. South Dakota ENA can be thankful that we are going to be able to deliver more pediatric education throughout the state of South Dakota. Rapid City candidates will be teaching in two or three courses in the Spring of 1998. Congratulations to all the new instructors.

We have an obligation to love and to take care of our children. South Dakota has historically been a state of forming communities and still is. The farm family has sacred family values. Farm families, as do most families, strive to assist their children to become healthy and productive members of our society.

The impact of farm related injuries and deaths is substantial in South Dakota. As most of us know who live in South Dakota, agriculture is one of the most dangerous occupations in the United States. Many farm children actively participate in farm work, play within the boundaries of the farm and are inadvertently exposed to multiple hazards in the farm environment. Children below the age of 19 compromise approximately 20 of the farm labor force.

Few studies have been done to identify types and severity of injuries with children and farm environments. However, toddlers and teens seem to be the most vulnerable and suffer the most devastating injuries, which often result in death.

When one considers the developmental level of these children, it becomes apparent why they are at greater risk. The toddler has a wild imagination and little fear. Teens also share a lack of fear, an attitude that "it won't happen to me" and will often take a risk for the thrill of the risk.

Many questions arise as we consider our farm children:

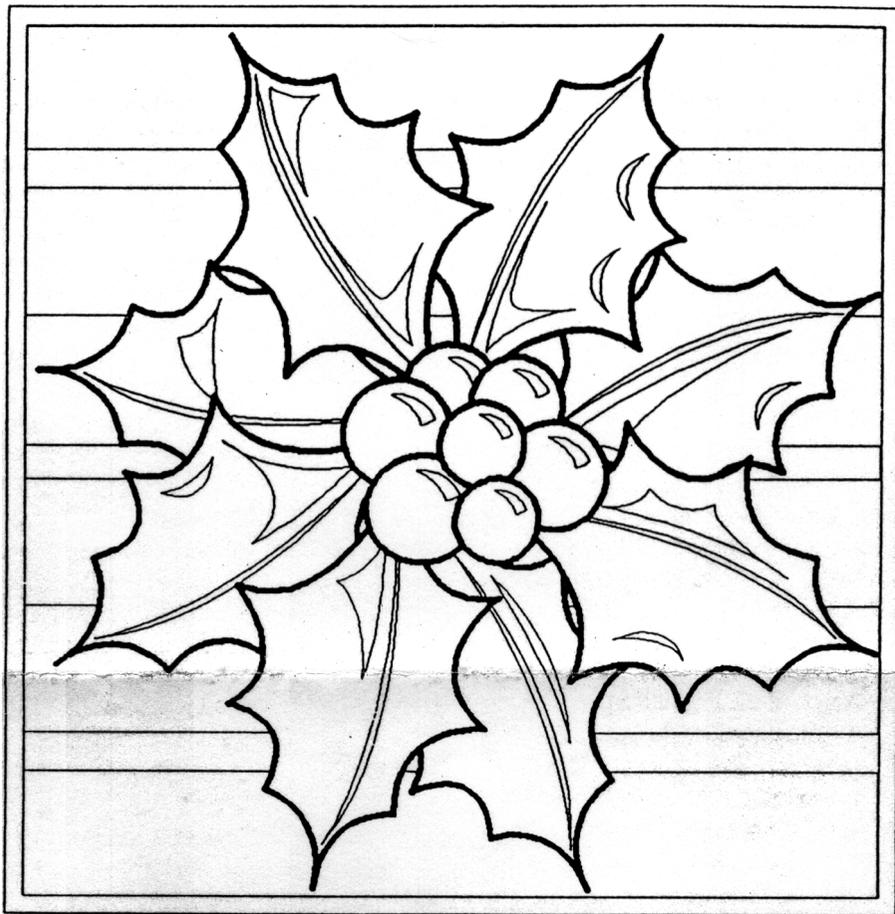
How can we best educate our farm families about farm safety?

In considering strategies for providing education, how do we transcend cultural, age and socioeconomic barriers?

Where do children's rights begin on the farm?

How do we answer these questions?

SEASON'S GREETINGS!



*From the
South Dakota
ENA*

Jill Wusner

Darlene Ewen

SOUTH DAKOTA TRAUMA SYSTEM
DEVELOPMENT ACTIVITIES

Clara Johnson, RN, BS
McKenna Trauma Service Manager

Trauma is a significant public health problem in the United States and in South Dakota. Trauma is the leading cause of death for persons 1-44 years of age. The trauma disease results in a greater loss of productive years than both cancer and heart disease.

The South Dakota Department of Health, Office of Rural Health and Emergency Medical Services was the recipient of a \$130,000 Trauma Care System Development Grant from the United States Department of Health and Human Services in 1994/95 fiscal year. Similar grants had been awarded previously to numerous (including Iowa, Minnesota, Wyoming, Montana, Nebraska, and North Dakota) other states.

Trauma morbidity and mortality had truly surfaced as a major concern in the United States. In addition, it was recognized that a percentage of trauma deaths were preventable. Approximately 17 urban trauma studies had been completed and all demonstrated a significant preventable death rate potential. Perhaps the most impressive study, particularly to South Dakota was the T. J. Esposito, MD, et.al., Montana study. Esposito's analysis of preventable trauma death and inappropriate trauma care in a rural/frontier state demonstrated a 27% hospital preventable death rate. This study strongly suggests comparisons for preventable death in South Dakota, a rural/frontier state also.

Additional studies reflect that implementation of a trauma system reduces the preventable death rate to approximately 5%. From this premise, the SD State Trauma Advisory Committee, appointment by Gov. Janklow in

statewide system development. Membership on the committee includes EMS personnel, SDAHO members, physicians, SD nurses, PA's, Health Care System staff and trauma nurse coordinators. SD ENA is represented by myself and Monica Huber (Trauma Committee Co-Chairs).

During the past 2 years, numerous meetings have been held and the following documents have been written:

- * Criteria for Consideration of Inter-Facility Trauma Transfer
- * Suggested Guidelines for Trauma System Activation
- * Trauma Facility (Hospital) Standards

The group's intent was and is to define an inclusive system with all hospitals as key players. The facility standards define criteria for hospitals to identify their level of trauma care capability. These levels include:

- * Trauma Receiving Facilities
- * Community Trauma Hospitals
- * Area Trauma Hospitals
- * Regional Trauma Center

Copies of these documents are available from the SD Department of Health, E.M.S., 600 E Capitol Ave., Pierre, SD 57501-2536 (Atten: Bob Graff).

In addition to the guidelines, committee efforts have also included the implementation of a state Trauma Registry.

Emergency and critical care nursing is an integral component in the delivery of trauma care. I challenge you to become a participant in trauma center state system development. Reducing morbidity and mortality

CEN--NEW AND OLD

Congratulations to the following who have successfully passed the test for Certification in Emergency Nursing (CEN). In February 1997, three nurses achieved this for the first time: Linda Barck, Sioux Falls, Kathleen Haack, Mitchell, and Mary Hornback, Piedmont; JoEllen Smith, Canton renewed. In July 1997, four nurses became new CEN's: Kay Boik, Sioux Falls, Janet Lee, Sioux Falls, Paula Vogelsang, Sioux Falls, and Leah VanDeBerg, Sioux Falls; five nurses renewed their certification: Peggy Graf, Sioux Falls, Darlene Even, Sioux Falls, Jean Tastad, Broton, Rhonda Weisser, Rapid City, and Kathleen Culver, Spearfish.

For those interested in joining these nurses in this level of expertise, the CEN testing has been revised in that now the testing can be done individually five days a week February through May 1998 and July through November 1998. The CEN exam is available only on computer through the ITC, a multistate network of testing centers. There are testing sites available in Sioux Falls and Rapid City in South Dakota and Bismarck and Fargo in North Dakota. Applications are available from Darlene Even or the BCEN @1-800-900-9659.